## 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 1 of 48

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Sheila First name  Ann Middle name  Linder Last name and Suffix (Sr., Jr., II, III)	Ī	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Sheila A. Smith Sheila Anne Linder		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2328		

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 2 of 48

Debtor 1 Sheila Ann Linder Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1514 Sedgwick Avenue, Apartment 1A	If Debtor 2 lives at a different address:
		Bronx, NY 10453  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Bronx	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Filed 09/25/19 19-13067-mg Doc 1 Entered 09/25/19 10:46:42 Main Document Pq 3 of 48

Case number (if known)

Sheila Ann Linder Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 4 of 48

Deb	otor 1 Sheila Ann Linder	•		Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprietor	
	•			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP	Code
	it to this petition.		Check the appropriate box to desc	ribe your business:
			☐ Health Care Business (as	defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (	as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defined in	11 U.S.C. § 101(53A))
			☐ Commodity Broker (as def	ned in 11 U.S.C. § 101(6))
			■ None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	. If you indicate that you are a small b	st know whether you are a small business debtor so that it can set appropriate usiness debtor, you must attach your most recent balance sheet, statement of come tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I Code.	am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter 11 and I	am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Any Prope	ty That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is			
	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
	identifiable hazard to public health or safety?			
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Street, City, State & Zip Code

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pa 5 of 48

Debtor 1 Sheila Ann Linder Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 6 of 48

Det	otor 1 Sheila Ann Linder	<u> </u>		Case numl	Der (if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	individual primarily for a per	consumer debts? Consumer debts are descended, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			■ Yes. Go to line 17.		
		16b.		<b>Dusiness debts?</b> Business debts are debt estment or through the operation of the business.	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busing	ess debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured creditor	operty is excluded and administrative expenses s?
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion
			001 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>□</b> \$500,	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 million	u wore than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the info	ormation provided is true and correct.
				7, I am aware that I may proceed, if eligibl relief available under each chapter, and I	e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United States Code, sp	pecified in this petition.
		bankrupt and 3571	cy case can result in fines up	t, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519
		Sheila A	Ann Linder Ann Linder e of Debtor 1	Signature of Deb	tor 2
		Executed		9 Executed on	
		∟>ecnie(	September 23, 201 MM / DD / YYYY	<u> </u>	IM / DD / YYYY

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 7 of 48

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel M. Katzner	Date	September 23, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Daniel M. Katzner 4305116		
The Law Offices of Daniel M. Katzner, P.C.		
1025 Longwood Avenue		
Bronx, NY 10459-5105		
Number, Street, City, State & ZIP Code		
Contact phone (718) 589-3999	Email address	danielkatzner@yahoo.com
4305116 NY		
Bar number & State		

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document

			Pg 8 of 48		
Fill in	this information to identify your c	ase:			
Debto	r 1 Sheila Ann Linder	,			
	First Name	Middle Name	Last Name		
Debto (Spouse	r 2 if, filing) First Name	Middle Name	Last Name		
` '	I States Bankruptcy Court for the:	SOUTHERN DISTRICT	OE NEW YORK		
Office	States Bankruptcy Court for the.	300THERN DISTRICT	OF NEW TORK		
Case (if know	number			□ Chool	k if this is an
(11 1410	,			_	ded filing
			,		J
Off;	cial Form 106Sum				
		and Liabilities on	d Cartain Statistical Information		40/45
			d Certain Statistical Information are filing together, both are equally responsible for		12/15
inform	ation. Fill out all of your schedule	s first; then complete th	e information on this form. If you are filing amende		
your o	riginal forms, you must fill out a n	new <i>Summary</i> and check	the box at the top of this page.		
Part 1	Summarize Your Assets				
				Your a	ssets
				Value	of what you own
	Schedule A/B: Property (Official Fo			•	220 222 00
1	a. Copy line 55, Total real estate, from	om Schedule A/B		\$	220,823.00
1	b. Copy line 62, Total personal prop	erty, from Schedule A/B		\$	28,036.00
1	c. Copy line 63, Total of all property	on Schedule A/B		\$	248,859.00
Part 2	Summarize Your Liabilities				
T alt 2	Odminarize Four Elabilities				
					i <b>abilities</b> nt you owe
	Schedule D: Creditors Who Have Cla		(Official Form 106D) he bottom of the last page of Part 1 of Schedule D	\$	318,564.00
	, ,		, 0	<b>—</b>	
3. 3	Schedule E/F: Creditors Who Have L a. Copy the total claims from Part 1	Unsecured Claims (Official (priority unsecured claim)	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
3	b. Copy the total claims from Part 2	? (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$	36,159.00
			Your total liabilities	\$	354,723.00
Part 3	Summarize Your Income and	Expenses			
1 (	Cahadula I: Vour Incomo (Official For	m 106I)			
	Schedule I: Your Income (Official For Copy your combined monthly income		I	\$	3,859.72
5. 3	Schedule J: Your Expenses (Official	Form 106.J)			
				\$	4,080.00
Part 4	Answer These Questions for A	Administrative and Stati	stical Records		
6. <i>I</i>	are you filing for bankruptcy unde	r Chanters 7 11 or 122			
_		•	neck this box and submit this form to the court with you	ur other scl	hedules.
	Yes				
7. <b>\</b>	What kind of debt do you have?				
ı	Your debts are primarily cons	umer debts. Consumer d	lebts are those "incurred by an individual primarily for	a personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 9 of 48

Debtor 1 Sheila Ann Linder Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

\$\_\_\_\_\_6,214.56

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document 19-13067-ma Doc 1

Till in this inform		Pg 10 of 48		
-III in this intorr	nation to identify your case ar			
Debtor 1	Sheila Ann Linder			
Dobtor 2	First Name	/liddle Name Last Name		
Debtor 2 Spouse, if filing)	First Name	liddle Name Last Name		
Jnited States Ba	nkruptcy Court for the: SOUTH	HERN DISTRICT OF NEW YORK		
Case number _				☐ Check if this is an amended filing
Official Fo	rm 106A/B			
3chedul	e A/B: Property	•		12/15
	Each Residence, Building, Land, o			
Do you own or h  ☐ No. Go to Par  ☐ Yes. Where is	ave any legal or equitable interes	in any residence, building, land, or similar property?		
No. Go to Par Yes. Where is  2218 Sewa	ave any legal or equitable interes	What is the property? Check all that apply  Single-family home  Dupley or multi-unit building	the amount of any sec	d claims or exemptions. Put ured claims on <i>Schedule D:</i>
No. Go to Par Yes. Where is  2218 Sewa	ave any legal or equitable interes  2. s the property?	What is the property? Check all that apply	the amount of any sec	
No. Go to Par  ■ Yes. Where is  1 2218 Sewa	ave any legal or equitable interes  2. s the property?	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home	the amount of any sec	ured claims on Schedule D: Claims Secured by Property.  Current value of the portion you own?
No. Go to Par Yes. Where is  2218 Sewing Street address,	ave any legal or equitable interes  2.  The property?  Ard Avenue  If available, or other description  NY 10473-000	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land	Current value of the entire property? \$441,646.00  Describe the nature of (such as fee simple, a life estate), if know	Current value of the portion you own?  \$220,823.00  of your ownership interest tenancy by the entireties, or
No. Go to Par Yes. Where is  2218 Sewing Street address,	ave any legal or equitable interes  2.  The property?  Ard Avenue  If available, or other description  NY 10473-000	What is the property? Check all that apply  Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other	Current value of the entire property? \$441,646.00  Describe the nature of (such as fee simple,	Current value of the portion you own?  2 \$220,823.00  2 f your ownership interest tenancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 11 of 48

ebto	or 1 <u>S</u>	heila Ann Linder		ase number (if known)	
Ca	rs, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
	ula.				
	res .				
		Uvundoi		Do not deduct secured cl	aims or exemptions. Put
3.1	Make:	Hyundai	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
	Model:	Elantra	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	<b>2017</b> nate mileage: <b>16,000</b>	_ Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		frace filleage	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
		e is leased	At least one of the deptors and another		
			☐ Check if this is community property	\$9,694.00	\$9,694.00
			(see instructions)		
				Do not deduct secured cl	oime or exemptions. But
.2	Make:	Nissan	Who has an interest in the property? Check one	the amount of any secure	
	Model:	Versa	_ Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
	Year:	2015	_ Debtor 2 only	Current value of the	Current value of the
		nate mileage: 59,780	_ ,	entire property?	portion you own?
		ormation:  is driven and paid for by	☐ At least one of the debtors and another		
	friend	e is driven and paid for by	☐ Check if this is community property	\$3,607.00	\$3,607.00
			(see instructions)		
Ad .pa	ld the do ges you	ollar value of the portion you on have attached for Part 2. Write	own for all of your entries from Part 2, including a	ny entries for	\$13,301.00
irt 6		be Your Personal and Household or have any legal or equitable	interest in any of the following items?		Current value of the
,	<i>-</i>	r navo any logal or oquitable		!	portion you own? Do not deduct secured claims or exemptions.
E	amples: I	<b>goods and furnishings</b> Major appliances, furniture, line	ns, china, kitchenware		
=	No	9			
	Yes. De	scribe			
		Misc. househ	old goods and furniture		\$1,800.00
					·
Εle	ctronics				
	amples:	Televisions and radios; audio, v	rideo, stereo, and digital equipment; computers, printe	ers, scanners; music collecti	ons; electronic devices
П	No	including cell phones, cameras	, media players, games		
_		scribe			
_	res. De	SCHDe			
		Misc. used ele			
_			ectronics		\$1,275.00
r-		<u>'</u>	ectronics		\$1,275.00
υU	llootibles	of value	ectronics		\$1,275.00
E		s of value Antiques and figurines; painting	ectronics s, prints, or other artwork; books, pictures, or other ar	rt objects; stamp, coin, or ba	
	amples: i		s, prints, or other artwork; books, pictures, or other a	rt objects; stamp, coin, or ba	

☐ Yes. Describe.....

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pq 12 of 48 Debtor 1 Case number (if known) Sheila Ann Linder 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$560.00 Misc. used clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,635.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$125.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar

Institution name:

Schedule A/B: Property

Chase

institutions. If you have multiple accounts with the same institution, list each.

17.1. Checking

☐ No

■ Yes.....

Official Form 106A/B

\$975.00

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pa 13 of 48 Debtor 1 Sheila Ann Linder Case number (if known) 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: Pension **CSEA Employee Benefit Fund** \$10,000.00 (defined benefit plan; value is estimated) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you?

Official Form 106A/B Schedule A/B: Property page 4

portion you own?
Do not deduct secured claims or exemptions.

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pa 14 of 48 Debtor 1 Sheila Ann Linder Case number (if known) 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No  $\hfill\square$  Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$11,100.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

page 5

### 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 15 of 48

Debtor	1 Sheila Ann Linder		Case number (if known)	
	you have other property of any kind you did not already list? amples: Season tickets, country club membership			
■ N	lo			
ΠY	es. Give specific information			
54. <b>A</b> c	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b> a	art 1: Total real estate, line 2			\$220,823.00
56. <b>P</b> a	art 2: Total vehicles, line 5	\$13,301.00		
57. <b>Pa</b>	art 3: Total personal and household items, line 15	\$3,635.00		
58. <b>Pa</b>	art 4: Total financial assets, line 36	\$11,100.00		
59. <b>Pa</b>	art 5: Total business-related property, line 45	\$0.00		
60. <b>P</b> a	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b> a	art 7: Total other property not listed, line 54 +	\$0.00		
62. <b>T</b> c	otal personal property. Add lines 56 through 61	\$28,036.00	Copy personal property total	\$28,036.00
63. <b>T</b> c	otal of all property on Schedule A/B. Add line 55 + line 62			\$248,859.00

Official Form 106A/B Schedule A/B: Property page 6 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document

			3 =		
Fill in this infor	mation to identify your	case:			
Debtor 1	Sheila Ann Linde	r			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF NEW YORK		
Case number (if known)				☐ Check if the characters of	

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	You C	Claim as	Exempt
---------	----------	--------------	-------	----------	--------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from	Check only one box for each exemption				

Schedule A/B that lists this property	portion you own			
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2017 Hyundai Elantra 16,000 miles Vehicle is leased	\$9,694.00		\$4,000.00	11 U.S.C. § 522(d)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. household goods and furniture Line from Schedule A/B: 6.1	\$1,800.00		\$1,800.00	11 U.S.C. § 522(d)(3)
Line IIom Schedule A.D. G. I			100% of fair market value, up to any applicable statutory limit	
Misc. used electronics Line from Schedule A/B: 7.1	\$1,275.00		\$1,275.00	11 U.S.C. § 522(d)(3)
Ellie Holli Gonedale A/D.			100% of fair market value, up to any applicable statutory limit	
Misc. used clothing Line from Schedule A/B: 11.1	\$560.00		\$560.00	11 U.S.C. § 522(d)(3)
Line from Scriedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$125.00		\$125.00	11 U.S.C. § 522(d)(5)
Line nom Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 17 of 48

Debtor	1 <b>Sh</b>	eila Ann Linder	. 9		Case number (if known)	
		ription of the property and line on A/B that lists this property	Current value of the portion you own	the Amount of the exemption you claim		Specific laws that allow exemption
			Copy the value from Check only one box for each exemption. Schedule A/B			
		ig: Chase Schedule A/B: 17.1	\$975.00 ■		\$975.00	11 U.S.C. § 522(d)(5)
LII	Line from <i>Scriedule AVB</i> . 11.1				100% of fair market value, up to any applicable statutory limit	
	Pension: CSEA Employee Benefit Fund (defined benefit plan; value is estimated) Line from Schedule A/B: 21.1		\$10,000.00		\$10,000.00	11 U.S.C. § 522(d)(12)
(d es					100% of fair market value, up to any applicable statutory limit	
	-	claiming a homestead exemption o adjustment on 4/01/22 and every			led on or after the date of adjustmen	nt.)
_		Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?
_		No			,	•
		Yes				

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document

<u> </u>	Pg 18 of 48			
Fill in this information to identify you	r case:			
Debtor 1 Sheila Ann Lind	er			
First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the:	SOUTHERN DISTRICT OF NEW YORK			
Case number				if this is an led filing
Official Form 106D Schedule D: Creditors	Who Have Claims Secured	d by Propert	y	12/15
	f two married people are filing together, both are equent, number the entries, and attach it to this form. Or			
1. Do any creditors have claims secured by	your property?			
☐ No. Check this box and submit th	nis form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of the information by	pelow	_		
Part 1: List All Secured Claims				
	nove than and approved aloise list the availter concretely	Column A	Column B	Column C
	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As eal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Hyundai Motor Finance	Describe the property that secures the claim:	\$4,591.00	\$9,694.00	\$0.00
Creditor's Name	2017 Hyundai Elantra 16,000 miles Vehicle is leased			
PO Box 20835 Fountain Valley, CA 92728	As of the date you file, the claim is: Check all that apply.			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	■ An agreement you made (such as mortgage or sec car loan)	ured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			

Date debt was incurred 07/2017

Last 4 digits of account number

## 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 19 of 48

Debtor	1 Sheila Ann Linder		Case number (if known)		
	First Name Middle N	lame Last Name			
	ocwen Loan Servicing LC	Describe the property that secures the claim:	\$302,757.00	\$441,646.00	\$0.00
Cr	reditor's Name	2218 Seward Avenue Bronx, NY			
	661 Worthington Street, te 1	10473 Bronx County			
V	Vest Palm Beach, FL 3409	As of the date you file, the claim is: Check all that apply.  Contingent			
Nu	umber, Street, City, State & Zip Code	☐ Unliquidated			
Who ov	wes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
	tor 1 only tor 2 only	<ul> <li>An agreement you made (such as mortgage or secar loan)</li> </ul>	ecured		
_	tor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	ast one of the debtors and another	☐ Judgment lien from a lawsuit			
	ck if this claim relates to a nmunity debt	Other (including a right to offset)			
Date de	bt was incurred 07/2006	Last 4 digits of account number			
	egional Acceptance	Describe the property that secures the claim:	\$11,216.00	\$3,607.00	\$7,609.00
50 P S	reditor's Name  00 Willow Brook Office ark uite 575 airport, NY 14450	2015 Nissan Versa 59,780 miles Vehicle is driven and paid for by friend As of the date you file, the claim is: Check all that apply.  ☐ Contingent			
_	umber, Street, City, State & Zip Code	☐ Unliquidated			
	wes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	tor 1 only tor 2 only	An agreement you made (such as mortgage or se car loan)	ecured		
☐ Debt	tor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At lea	ast one of the debtors and another	☐ Judgment lien from a lawsuit			
	ck if this claim relates to a nmunity debt	Other (including a right to offset)			
Date de	bt was incurred 05/2017	Last 4 digits of account number			
			<b>A245</b> = 2 : :		
		Column A on this page. Write that number here: the dollar value totals from all pages.	\$318,564.0		
	that number here:	i ine donar value totais mom an pages.	\$318,564.0	00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document

	_	Pg 2	20 of 48		
Fill in this	information to identify your o				
Debtor 1	Sheila Ann Linder	•			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	SOUTHERN DISTRICT OF N	NEW YORK		
Case numb (if known)	per			С	Check if this is an amended filing
	Form 106E/F lle E/F: Creditors W	ho Have Unsecured	d Claims		12/15
any executor Schedule G: Schedule D: left. Attach the name and ca	ry contracts or unexpired leases Executory Contracts and Unexpi Creditors Who Have Claims Sect	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space is e. If you have no information to r	list executory  Do not include  needed, copy	I Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property (Ce any creditors with partially secured clay the Part you need, fill it out, number the donot file that Part. On the top of any and the top of any any any and any any and any	Official Form 106A/B) and on aims that are listed in e entries in the boxes on the
	creditors have priority unsecured				
■ No. 0	Go to Part 2.				
☐ Yes.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	ured claims against you?			
□ No. `	You have nothing to report in this pa	art. Submit this form to the court wit	h your other sc	hedules.	
Yes.					
unsecur	ed claim, list the creditor separately	for each claim. For each claim liste	ed, identify what	no holds each claim. If a creditor has mor t type of claim it is. Do not list claims alread an three nonpriority unsecured claims fill ou	ly included in Part 1. If more
r art 2.					Total claim
4.1 <b>Ba</b>	nk Of America	Last 4 digits of ac	count number	r	\$2,804.00
Nor PC Wi	npriority Creditor's Name D Box 17054 Ilmington, DE 19884	When was the de	bt incurred?	Various dates in or before 20	
	mber Street City State Zip Code o incurred the debt? Check one.	As of the date you	u file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	other Type of NONPRIC	RITY unsecur	ed claim:	
□ dek	Check if this claim is for a comm		sing out of a car	paration agreement or divorce that you did	not
	he claim subject to offset?	report as priority cl		paration agreement or divorce that you did	HOL
	No	Debts to pension	on or profit-shar	ing plans, and other similar debts	
	Yes	Other. Specify	Credit car	d purchases	

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 21 of 48

Debto	Sheila Ann Linder	Case number (if known)	
4.2	Best Buy/CBNA Nonpriority Creditor's Name	Last 4 digits of account number	\$1,978.00
	P O Box 6497	When was the debt incurred? Various dates in or before 2017	
	Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file the plaint in Oberland that such	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	
4.3	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$649.00
	PO Box 85015	When was the debt incurred? Various dates in or before 2017	
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	□ Yes	■ Other. Specify Credit card purchases	
4.4	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$8,093.00
	PO Box 85015 Salt Lake City, UT 84130	When was the debt incurred? Various dates in or before 2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit card purchases	
	_ 100	- Other. Specify	

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 22 of 48

Debto	Sheila Ann Linder	Case number (if known)			
4.5	Comenity Bank / Victoria's Sec	Last 4 digits of account number	\$576.00		
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred? Various dates in or before 2017			
	Columbus, OH 43218  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck an that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	□ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit card purchases			
4.6	Feb Retail	Last 4 digits of account number	\$3,753.00		
	Nonpriority Creditor's Name PO Box 4499	When was the debt incurred?			
	Beaverton, OR 97076  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	,			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	$\square$ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit card purchases			
4.7	Macys DSNB	Last 4 digits of account number	\$2,576.00		
	Nonpriority Creditor's Name	- Washington and Authorities and Authorities and Authorities 2017			
	9111 Duke Blvd Mason, OH 45040	When was the debt incurred? Various dates in or before 2017			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit card purchases			
	55	- Other, Specify State Said Partitions			

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 23 of 48

Debto	Sheila Ann Linder	Case number (if known)	
4.8	Montefiore	Last 4 digits of account number	\$555.00
	Nonpriority Creditor's Name PO Box 4296 Church St Station New York, NY 10261	When was the debt incurred? Various dates in or before 2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bills	
4.9	Nordstrom / TDBank USA Nonpriority Creditor's Name	Last 4 digits of account number	\$6,949.00
	13531 E. Caley Ave Englewood, CO 80111	When was the debt incurred? Various dates in or before 2017	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit card purchases	
4.1 )	Raymour and Flanigan	Last 4 digits of account number	\$7,845.00
	Nonpriority Creditor's Name 1000 Macarthur Blvd Mahwah, NJ 07430	When was the debt incurred? Various dates in or before 2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Credit Card Purchases	

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pa 24 of 48

1 Sheila Ann Linder		· · · · · ·	
Syncb / Tjx	Last 4 digits of account number		\$381
Nonpriority Creditor's Name PO Box 965015	When was the debt incurred?	Various dates in or before 2017	
Orlando, FL 32896	when was the dest mounted.	Various dates in or before 2017	
Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separ	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
	J	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 36,159.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 36,159.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 25 of 48

Fill in this infor	mation to identify your	case:		
Debtor 1	Sheila Ann Linde	r		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK	
Case number				
(if known)				

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3	City		State	ZIF Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	Oity		Oldio	Zii Codo	
2.4	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document

			Pg 26 of 48		
Fill in this	information to identify your				
Debtor 1	Sheila Ann Linde				
Debioi i	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
	. =				
Officia	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
ill it out, a our name	nd number the entries in the and case number (if known	e boxes on the left. Attach ). Answer every question	the Additional Page :	to this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes	3				
Arizon  No.	hin the last 8 years, have yo a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
in line Form out Co	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill litor to whom you owe the debt
1	Name, Number, Street, City, State and Z	ZIP Code		Check all schedules	•
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	
				☐ Schedule G, line	
-	Newstran				
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	ne
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

# 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 27 of 48

Fill	in this information to identify your ca	ase:								
De	btor 1 Sheila Ann I	Linder			_					
1 -	btor 2 buse, if filing)									
Un	ited States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF NEW YORK							
	se number		_			Che	ck if this is	:		
(If k	nown)					l	An amend	J		
									ng postpetition following date:	
0	fficial Form 106I					Ī	MM / DD/ `	YYYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  It 1: Describe Employment	ır spouse is not filing w	ith you, do not inclu	ıde infor	mati	on abou	t your sp	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed	■ Employed			☐ Empl	oyed		
		Employment status	☐ Not employed				□ Not e	employed		
	employers.	Occupation	Developmental	Disabli	ity A	ide				
	Include part-time, seasonal, or self-employed work.	Employer's name	Metro DTS - Sta	ate of N	ew `	York				
	Occupation may include student or homemaker, if it applies.	Employer's address	240 West 98th S New York, NY 1							
		How long employed t	here? <u>20 Yea</u>	rs						
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.		you have nothing to r	eport for	any	line, writ	e \$0 in the	space. In	clude your no	n-filing
•	ou or your non-filing spouse have mo e space, attach a separate sheet to	, ,	ombine the informatio	on for all	empl	oyers foi	that perso	on on the I	ines below. If	you need
						For De	btor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		5,347.98	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	5,3	47.98	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

# 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 28 of 48

Debto	or 1	Sheila Ann Linder	-	Case	number (if known)			
				For	Debtor 1		btor 2 or	
	Cop	by line 4 here	4.	\$	5,347.98	\$	N/A	
5.	List	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,488.26	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	· \$_	0.00	* + \$	N/A N/A	
•		· · ·		· —		· · · · · · · · · · · · · · · · · · ·		
		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,488.26	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,859.72	\$	N/A	
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.		8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
		culate monthly income. Add line 7 + line 9.	10. \$	;	3,859.72 + \$	ı	N/A = \$ 3	3,859.72
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L					
	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depen	,		•	edule J. 11. +\$	0.00
		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certailies					·	3,859.72
							Combine	
13.	Do : ■ □	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?				monthly	mcome

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify	your case:					
Deb	otor 1 Sheila Ann	Linder			Che	ck if this is:	
	otor 2					An amended filing A supplement show 13 expenses as of	wing postpetition chapter the following date:
Unit	ted States Bankruptcy Court for t	ne: SOUTH	HERN DISTRICT OF NEW	YORK		MM / DD / YYYY	
	se number						
	known)						
	fficial Form 106J						
	chedule J: Your			a filing tagathar b	oth ore only	ally roopensible fo	12/15
info	as complete and accurate ormation. If more space is in mber (if known). Answer even	needed, atta	ch another sheet to this				
Par	Describe Your Hou Is this a joint case?	sehold					
	■ No. Go to line 2.  □ Yes. Does Debtor 2 liv	e in a separ	ate household?				
	☐ Yes. Debtor 2 m	ust file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have dependents	? □ No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the dependents names.			Stepdaughter		25	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes
						_	□ No
3.	Do your expenses includ expenses of people other yourself and your depend	than dents?	No Yes				☐ Yes
Est	t 2: Estimate Your Ong timate your expenses as of penses as of a date after the plicable date.	your bankr	uptcy filing date unless y				
the	clude expenses paid for wit e value of such assistance a fficial Form 106I.)					Your exp	enses
4.	The rental or home owne payments and any rent for			nclude first mortgag	e 4. \$	\$	1,600.00
	If not included in line 4:						
	<ul><li>4a. Real estate taxes</li><li>4b. Property, homeowne</li></ul>	r's, or renter	's insurance		4a. \$ 4b. \$	·	0.00
	4c. Home maintenance,				4c. \$	·	80.00
5.	4d. Homeowner's assoc		aominium aues <b>our residence</b> , such as hoi	me equity loans	4d. § 5. §	·	0.00

# 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 30 of 48

Debtor 1	Sheila Ann Linder	Case num	ber (if known)	
6. Uti	lities:			
6. <b>G</b> ti		6a.	\$	150.00
6b.		6b.	\$	0.00
6c.		6c.	·	220.00
6d.	, ,	6d.	·	150.00
	od and housekeeping supplies	7.	·	600.00
_	ildcare and children's education costs	8.	\$	0.00
. Clo	thing, laundry, and dry cleaning	9.	\$	150.00
0. <b>Pe</b>	sonal care products and services	10.	\$	175.00
	dical and dental expenses	11.	\$	150.00
	Insportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	175.00
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	aritable contributions and religious donations	14.	·	0.00
	urance.	14.	Φ	0.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	a. Life insurance	15a.	\$	0.00
151	o. Health insurance	15b.	\$	0.00
150	c. Vehicle insurance	15c.	·	250.00
	I. Other insurance. Specify:	15d.	· -	0.00
	(es. Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	ecify:	16.	\$	0.00
	tallment or lease payments:			
	a. Car payments for Vehicle 1	17a.	\$	380.00
17	o. Car payments for Vehicle 2	17b.	\$	0.00
170	c. Other. Specify:	17c.	\$	0.00
170	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as		•	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	ner payments you make to support others who do not live with you.	19.	\$	0.00
	ecrry. her real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		ur Incomo	
	a. Mortgages on other property	20a.		0.00
	o. Real estate taxes	20b.	·	0.00
	c. Property, homeowner's, or renter's insurance	20c.	· -	0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
ı. Otl	ner: Specify:	21.	+\$	0.00
2. <b>Ca</b>	culate your monthly expenses			
22	a. Add lines 4 through 21.		\$	4,080.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	,,,,,,,,,
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	4 000 00
220	Add the ZZa and ZZD. The result is your monthly expenses.		Ψ	4,080.00
	culate your monthly net income.		_	
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	· -	3,859.72
231	o. Copy your monthly expenses from line 22c above.	23b.	-\$	4,080.00
230	c. Subtract your monthly expenses from your monthly income.			
200	The result is your monthly net income.	23c.	\$	-220.28
	you expect an increase or decrease in your expenses within the year after yo			
mo	example, do you expect to finish paying for your car loan within the year or do you expect you dification to the terms of your mortgage?	r mortgage p	payment to increase	or decrease because of
	No			
	Yes. Explain here:			

## 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 31 of 48

Fill in this inforn	nation to identify your	case:			
Debtor 1	Sheila Ann Linde				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRIC	T OF NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	n 106Dec				
	-	ın Individua	I Dobtoric S	Schodulos	
Declarat	ion About a	<u>III IIIUIVIUUA</u>	i penioi 2 3	criedules	12/15
16 6					
if two married pe	opie are filing together	r, both are equally respo	onsible for supplying o	correct information.	
You must file this	s form whenever you fi	le bankruptcy schedule	es or amended schedu	les. Making a false state	ement, concealing property, or
obtaining money	or property by fraud in	n connection with a ban			00, or imprisonment for up to 20
years, or both. 18	3 U.S.C. §§ 152, 1341, 1	519, and 3571.			
٥.					
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an atto	orney to help you fill or	it bankruptcy forms?	
_ NI:					
■ No					
☐ Yes. N	lame of person				kruptcy Petition Preparer's Notice,
				Declaration	n, and Signature (Official Form 119)
Under nenal	lty of periury I declare	that I have read the sur	mmary and schedules	filed with this declaration	on and
	true and correct.	that I have read the 3th	illinary and scriedules	inca with this acciaration	on and
•					
	ila Ann Linder		X		
	Ann Linder		Signature	of Debtor 2	
Signatur	e of Debtor 1				

Date

Date September 23, 2019

# 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 32 of 48

Fill	in this inforn	nation to identify you	r case:			
Del	btor 1	Sheila Ann Lind				
De	btor 2	First Name	Middle Name	Last Name		
1 -	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF NEW YORK		
Cas	se number					
(if kr	nown)				_	Check if this is an
					a	mended filing
$\sim$	Kisial Es	was 407				
	ficial Fo		Affaira far Individ	duals Eiling for P	ankruntav	414.6
			Affairs for Individ			4/19
					equally responsible for sup y additional pages, write you	
nun	nber (if knowr	n). Answer every que	stion.			
Pai	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married					
	■ Not mar	ried				
2.	During the la	ast 3 vears, have you	lived anywhere other than	where you live now?		
	_	, , ,				
	□ No ■ Voc Lie	t all of the places you	ived in the last 3 years. Do no	at include where you live now	,	
		, ,	,	,		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
		ard Avenue	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1
	Bronx, NY	10473	01/2007 to 01/2019			From-To:
3.					ity property state or territor	
stat	es and territori	es include Arizona, Ca	ilfornia, Idano, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	visconsin.)
	■ No					
	☐ Yes. Ma	ike sure you fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explai	n the Sources of You	r Income			
4.	Did you have	a any inaoma from ar	nnlovment er frem eneratin	a a business during this w	ear or the two previous cale	nder veere?
<b>4</b> .	Fill in the tota	al amount of income yo	u received from all jobs and a	all businesses, including part	time activities.	iluai yeais:
	If you are filin	ng a joint case and you	have income that you receive	e together, list it only once ur	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Fro	om Januarv 1	of current year until	Magaa as remissions	\$51,137.00	☐ Wages, commissions,	,
		d for bankruptcy:	Wages, commissions, bonuses, tips	ψο 1,101.00	bonuses, tips	
			☐ Operating a business		☐ Operating a business	
			. •			

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 33 of 48

De	btor 1	Sh	eila Ann L	inder		Case number (if known)						
					Dahtar 4		Dahtar 2					
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)			
For last calendar year: (January 1 to December 31, 2018)				31, 2018 )	■ Wages, commissions, bonuses, tips	\$64,217.00	☐ Wages, combonuses, tips	ımissions,				
					☐ Operating a business		☐ Operating a	business				
For the calendar year before that: (January 1 to December 31, 2017)					■ Wages, commissions, bonuses, tips	\$132,424.00	☐ Wages, commissions, bonuses, tips					
					☐ Operating a business		☐ Operating a	business				
	winnir	ngs. İ ach s No	f you are fili	ng a joint cas	pensions; rental income; inter se and you have income that y ome from each source separat	you received together, list it	only once under De	ebtor 1.	d gambling and lottery			
					Debtor 1		Debtor 2					
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)			
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy						
6.	_	i <b>ther</b> No.	Neither De	ebtor 1 nor E primarily for a 90 days befo Go to line 7 List below e paid that cr	each creditor to whom you pai editor. Do not include paymen	Imer debts. Consumer debted purpose."  d you pay any creditor a toted a total of \$6,825* or more ats for domestic support obli	al of \$6,825* or mo	re? /ments and t	he total amount you			
			* Subject	not include payments to an attorney for this bankruptcy case. to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.								
	•	Yes.	Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
			No.	Go to line 7.								
			□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.							
	Creditor's Name and Address			d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this	payment for			
						paiu	Suii Owe					

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pa 34 of 48 Debtor 1 Sheila Ann Linder Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person

Address:

Person to Whom You Gave the Gift and

Pa 35 of 48 Debtor 1 Case number (if known) Sheila Ann Linder 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property **Person Who Was Paid** Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You 08/12/2019 \$1,200.00 The Law Offices of Daniel M. Katzner, **Attorney Fees** P. 1025 Longwood Avenue Bronx, NY 10459 danielkatzner@yahoo.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you

Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42

Main Document

19-13067-mg

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 36 of 48

Debtor 1 Sheila Ann Linder Case number (if known)

		y property to a	a self-settle	ed trust or similar device o	f which you are a							
☐ Yes. Fill in the details.												
Name of trust	Description and v	Date Transfer was made										
tt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposi	t Boxes, and S	torage Uni	ts								
Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.												
Yes. Fill in the details.												
		Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer							
Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?												
■ No □ Yes. Fill in the details.												
Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?							
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?												
■ No □ Yes. Fill in the details.												
Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?							
rt 9: Identify Property You Hold or Control fo	r Someone Else											
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.												
■ No □ Yes. Fill in the details.												
Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)		Describe the property		Value							
rt 10: Give Details About Environmental Inform	mation											
the purpose of Part 10, the following definition	s apply:											
Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous of toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.												
Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.												
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.												
	No Yes. Fill in the details.  Name of trust  **B*** List of Certain Financial Accounts, Instr. Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Do you now have, or did you have within 1 yeash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Have you stored property in a storage unit or  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  **T9*** Identify Property You Hold or Control for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  **T9*** Identify Property You Hold or Control for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  **T10*** Give Details About Environmental Information of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the following definition of the purpose of Part 10, the	No  Yes. Fill in the details.  Name of trust  Description and volumber, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  No  Yes. Fill in the details.  Nome of Storage Facility Address (Number, Street, City, State and ZIP Code)  To it?  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Code)  **Where is the prof (Number, Street, City, State and ZIP Code)  **Code Code Code Code Code Code Code Code	beneficiary? (These are often called asset-protection devices.)  No No No No Yes. Fill in the details.  Name of trust  Description and value of the protection devices.)  Name of trust  Description and value of the protection devices.  Name of trust  Description and value of the protection devices.  Name of trust  Description and value of the protection devices.  No within 1 year before you filed for bankruptcy, were any financial accounts or inst sold, moved, or transferred?  No No No Server, City, State and ZIP Code)  No	■ No	No   Yes. Fill in the details.							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 37 of 48

Debtor 1 Sheila Ann Linder Case number (if known)

24.	_	hat you may be liable or potentially liable under or in violation of an environmental law?		ntal law?			
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of an	y release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or admin	nistrative proceeding under any envi	ironmental law? Include settlements ar	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	Give Details About Your Business or Co	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have ar	ny of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing exec	utive of a corporation					
	☐ An owner of at least 5% of the voting o	or equity securities of a corporation					
	No. None of the above applies. Go to Part 12.						
	☐ Yes. Check all that apply above and fill in	the details below for each business	s.				
	Address	Describe the nature of the business	Employer Identification number Do not include Social Security n				
	(Number, Street, City, State and ZIP Code)	lame of accountant or bookkeeper	Dates business existed				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No						
	Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pq 38 of 48 Debtor 1 Case number (if known) Sheila Ann Linder Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sheila Ann Linder Sheila Ann Linder Signature of Debtor 2 Signature of Debtor 1 Date September 23, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

■ No

## 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 39 of 48

Fill in this infor	rmation to identify your case:				
Debtor 1	Sheila Ann Linder				
<b>5</b>	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: SOU	THERN DISTRI	CT OF NEW YORK		
Case number					
(if known)				☐ Check if this is an amended filing	
Official Fo	orm 108				
Stateme	nt of Intention fo	r Individ	duals Filing Under Cha	apter 7 12/15	
-	lividual filing under chapter 7, ve claims secured by your pro	-	it this form if:		
_	sed personal property and the		expired.		
You must file th	is form with the court within 3 ever is earlier, unless the cour	0 days after yo	u file your bankruptcy petition or by the ome for cause. You must also send copie	date set for the meeting of creditors, es to the creditors and lessors you list	
		nint case both	are equally responsible for supplying co	orract information. Both debtors must	
	nd date the form.	onit case, both	are equally responsible for supplying co	Street information. Both deptors must	
	and accurate as possible. If myour name and case number (i		eeded, attach a separate sheet to this for	rm. On the top of any additional pages,	
Part 1: List Y	our Creditors Who Have Secu	red Claims			
		Schedule D: C	reditors Who Have Claims Secured by Pr	Property (Official Form 106D), fill in the	
information b Identify the c	elow. reditor and the property that is c		What do you intend to do with the proper secures a debt?	Prty that Did you claim the property as exempt on Schedule C3	
Creditor's	Hyundai Motor Finance	ī	☐ Surrender the property.	□No	
name:	•		☐ Retain the property and redeem it.		
	f 2017 Hyundai Elantra 16		Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property	miles	ı	Retain the property and [explain]:		
securing debt	: Vehicle is leased	_	Retain and Pay		
Creditor's (	Ocwen Loan Servicing LLC			<b>-</b>	_
	ocwell Loan Servicing LLC		Surrender the property.	■ No	
name:			☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes	
Description of	f 2218 Seward Avenue Br	onx, NY '	Reaffirmation Agreement.		
property securing debt	10473 Bronx County	] 	☐ Retain the property and [explain]:		
Creditor's	Regional Acceptance	ſ	☐ Surrender the property.	□ No	
			- Carrondor the property.	<b>—</b> 110	

Official Form 108

Description of

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

☐ Retain the property and redeem it.

 $\square$  Retain the property and enter into a

Retain the property and [explain]:

Reaffirmation Agreement.

friend

2015 Nissan Versa 59,780 miles

Vehicle is driven and paid for by

Yes

## 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 40 of 48

Debtor 1	Sheila Ann Linder	Case number (if known)	
securin	g debt:	Retain & Pay	_
Part 2:	List Your Unexpired Personal Property	/   02505	
For any u	nexpired personal property lease that your rmation below. Do not list real estate le	you listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; the y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(	e lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on on leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	on on leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under per	nalty of perjury, I declare that I have indi hat is subject to an unexpired lease.	licated my intention about any property of my estate that se	cures a debt and any personal
X /s/ \$	Sheila Ann Linder	Signature of Debtor 2	
	ila Ann Linder ature of Debtor 1	Signature of Debtor 2	
Date	Sentember 23, 2019	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	l	iquidation
\$24	5 fili	ng fee
\$7	5 ac	Iministrative fee
+ \$1	5 tru	ustee surcharge
\$33	5 to	tal fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 19-13067-mg Doc 1 Filed 09/25/19 Entered 09/25/19 10:46:42 Main Document Pg 45 of 48

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Southern District of New York

In re	Sheila Ann Linder		Case No	) <b>.</b>	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be pa	id to me, for services r	
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received		\$	1,200.00	
	Balance Due		\$	0.00	
2.	\$ 335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other persor	unless they are me	mbers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the name				law firm. A
6.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspec	ets of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed]  A per diem attorney may appear at the 3 greater than \$200.00 per appearance. The has not been nor will be charged any additional provisions as needed.	ement of affairs and plan which ors and confirmation hearing, a 41a Meeting of Creditors of these fees will be paid from	h may be required; nd any adjourned h and/or Confirman n the firm's oper	earings thereof;	a fee of no
<b>7.</b> 1	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement fo	r payment to me fo	representation of the	debtor(s) in
s	eptember 23, 2019	/s/ Daniel M. Kat	zner		
	ate	Daniel M. Katzne	er 4305116		
		Signature of Attorn The Law Offices		zner, P.C.	
		1025 Longwood	Avenue	,	
		Bronx, NY 10459 (718) 589-3999		02	
		danielkatzner@y			
		Name of law firm			

### **United States Bankruptcy Court** Southern District of New York

e	Sheila Ann Linder		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	MATRIX	
ab	ove-named Debtor hereby verifies	that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
ate:	September 23, 2019	/s/ Sheila Ann Linder		
		Sheila Ann Linder		

Signature of Debtor

AMERICAN EXPRESS PO BOX 981537 EL PASO, TX 79998

AMERICAN HONDA FINANCE 200 CONTINENTAL DRIVE, SUITE 3 NEWARK, DE 19713

BANK OF AMERICA PO BOX 17054 WILMINGTON, DE 19884

BEST BUY/CBNA P O BOX 6497 SIOUX FALLS, SD 57117

CAPITAL ONE PO BOX 52530 CAROL STREAM, IL 60196

COMENITY BANK / VICTORIA'S SEC PO BOX 182789 COLUMBUS, OH 43218

FEB RETAIL
PO BOX 4499
BEAVERTON, OR 97076

FINGERHUT / WEBBANK 6250 RIDGEWOOD ROAD SAINT CLOUD, MN 56303

HYUNDAI MOTOR FINANCE PO BOX 20835 FOUNTAIN VALLEY, CA 92728

MACYS DSNB 9111 DUKE BLVD MASON, OH 45040

MONTEFIORE PO BOX 4296 CHURCH ST STATION NEW YORK, NY 10261 MUNICIPAL CREDIT UNION 22 CORTLANDT STREET NEW YORK, NY 10007

NORDSTROM / TDBANK USA 13531 E. CALEY AVE ENGLEWOOD, CO 80111

OCWEN LOAN SERVICING LLC 1661 WORTHINGTON STREET, STE 1 WEST PALM BEACH, FL 33409

RAYMOUR AND FLANIGAN 1000 MACARTHUR BLVD MAHWAH, NJ 07430

REGIONAL ACCEPTANCE 500 WILLOW BROOK OFFICE PARK SUITE 575 FAIRPORT, NY 14450

SAXON MORTGAGE SERVICES, INC 2700 AIRPORT FREEWAY FORT WORTH, TX 76111

SYNCB / TJX PO BOX 965015 ORLANDO, FL 32896

WELLS FARGO DLR SVC / WACH DLS PO BOX 1697 WINTERVILLE, NC 28590